

whole thing. This was not something that anybody brought to me directly.

Somalia

Q. Why won't the Somali warlords just go underground for 6 months and wait for us to get out and then declare victory? Isn't there a danger in giving them a deadline when we're going to get out?

The President. Well, it might happen. But keep in mind, we're going to wind up—by then there should be an even larger U.N. force there. And that's our objective. In 6 months, we will have been there well over a year longer than we ever committed to stay.

So we will have given them well over a year longer, more personnel, and more efforts in this endeavor. We have obligations elsewhere, including this very important effort that we've invested a lot in in Haiti, to try to support that. So, I just don't believe that we can be in a position of staying longer than that.

I also think once we send a signal to them that we're not going to tolerate people messing with us or trying to hurt our people or trying to interrupt the U.N. mission, that we have no interest in denying anybody access to playing a role in Somalia's political future. I think a mixed message has been sent out there in the last couple of months by people who are doing the right thing. Our people are doing the right thing. They're trying to keep our folks alive, trying to keep the peacekeeping mission going, trying to get the food out there. But we need to clearly state, unambiguously, that our job is not to decide who gets to play a role in post-war Somalia, that we want the political process to work. So let's give it a chance to work and see if it does.

Thank you.

NOTE: The exchange began at 12:20 p.m. on the South Lawn at the White House.

Remarks at Robert Wood Johnson Hospital in New Brunswick, New Jersey
October 8, 1993

Thank you very much, ladies and gentlemen, Governor and Mrs. Florio, Congressman Menendez, Congressman Klein, Mayor Cahill. To the distinguished participants in this program, Mr. Holzberg, Dr. Hammond, Sheriff Fontura. I hope he doesn't decide to run for President anytime soon. He gave a fine talk, I thought.

Mrs. Jones, thank you for coming here and sharing your story with us, and I thank your son sitting over here, and two other fine young men who were the victims of violence, for helping to describe their condition to Governor and Mrs. Florio and to me today and what happened to them.

I am delighted to be back here not only in New Jersey but in New Brunswick. I started one of my other crusades here not very long ago, the crusade to pass a national service bill that would give tens of thousands of our young people a chance to earn credit against their college educations by working in their communities. A few days ago, we signed that bill into law, and I think it will change the face of America.

That is one of the many changes that I hope we can make as we move toward the 21st century. But I believe very strongly that in order for us all to have the courage to make those changes, we need a higher level of personal security in this country. And I wanted to come back here to this magnificent health facility to talk today for a moment about the relationship between health care and the need for health security and violence and the need for personal security.

As you've already heard, these two things are very closely related. I'm honored to be here with my good friend and former colleague, Governor Jim Florio. You know, I was elated when Jim was awarded the John F. Kennedy Profiles in Courage Award earlier this year, because I think he really earned it. My guess is, he earned it by making even some of you in this audience mad from time to time. But I know what it's like to be a Governor and to have to work on a balanced budget, and I know what kind of trouble New Jersey was in, and you now have the best credit rating in the Northeast. I know, too, how hard it is to stand up and

fight for things like an end to assault weapons, and what a long struggle it is; just passing the law is only the beginning before the final impact is felt, perhaps a year, perhaps 5 years down the road.

But we need more people in our country who will call them like they see them, who will try to identify the problems and try to get up every day and try to do something about it. And I'm just proud to be associated with Jim Florio, and I appreciate what the sheriff said about him.

Today I saw a lot of things that I have seen before over the last 3½ years since I started looking into the health care system and long before I even dreamed of running for President. I saw at this great American health institution, the very best of American health care, as well as what is wrong with America's health care. And indeed, if we want to finally, at long last, join the ranks of every other advanced country in the world and provide health care security to our people, health care that's always there and that can never be taken away, we have to work vigilantly to keep what is right with our health care system as we work to change what is wrong.

What is right is obvious about this place. I saw the care that the nurses and the doctors were giving. I saw the concern that this hospital administrator had for the way each part of this hospital worked as I worked my way through it. And I saw the way a lot of these patients, many of them very young, responded to their caregivers. I saw the gratitude in the parents' and the family members' eyes. That is the core, the kernel, the heart, the spirit of our health care system. And we can't do anything to interfere with that. Indeed, we have to be committed to enhancing that.

But I also heard three different stories about people who showed up here without health care coverage or with an insurance policy that wouldn't pay or with two different groups arguing about who owed and about long delays before the hospital got paid, and massive, massive expenditures of time and money filling out first one form and then another, and then hassling people to try to get them to pay the bill. And that is what is wrong with this health care system.

We are the only country in the world with an advanced economy that can't figure out how to cover all of our people. So what happens? They get health care all right, and then the

rest of you pay the bill or the hospital goes broke. And so many of our people get health care when it's too late and too expensive because they have no coverage; so they don't get the primary and preventive services that keep people well.

And of course, as I already said, the administrative costs are absolute nightmares. I was in the Washington Children's Hospital the other day and was told that every year they spend in that one hospital alone \$2 million filling out forms that have nothing to do with keeping patient records for health care purposes, that the doctor spends so much time, the 200 doctors on staff there, on paperwork that has nothing to do with patient health care and keeping records of it, that they could see another 10,000 children a year collectively, just 200 doctors if they didn't have to do it.

So the question for us is, how do we change what's wrong, keep what's right, and how can we deal with the burden of our health care system? We now spend over 14 percent of our income in America on health care. Canada spends 10. No other nation in the world spends over 9. Even Germany and Japan, two very wealthy advanced nations, spend less than 9 percent of their income on health care, and their health outcomes are roughly similar, if not better, than ours.

Now, how did this come to be, and how can we change it? We don't want to do anything to undermine the quality of health care. If you cover everybody, if you give them primary and preventive health care services, if you do as our plan and you increase investment in medical research, you can improve quality. You certainly don't erode it. We don't want to destroy people's right to choose their health care system. Under our plan, each employee in each workplace would get at least three choices. Today, only one-third of workers who are insured in the workplace have more than one choice. Contrary to some of the complaints about it, our plan will increase consumer choice, not decrease it.

We do have to simplify the system. I said that before. And we do have to achieve savings in some areas where they can be achieved. Plainly, if you reorganize the system, you won't have as much fraud and abuse, and you'll have dramatic savings in paperwork. Your administrator was telling me that this hospital has 25 percent administrative costs. The average hospital has hired four clerical workers for every

direct health caregiver in the last 10 years. The average doctor 10 years ago was taking home 75 percent of all the money that came into a private clinic. Today, that figure is down to 52 percent, 23 cents gone to a system of 1,500 separate insurance companies, thousands of different policies, thousands of different forms, and Government paperwork and bureaucracy on top of that.

And finally, we have to ask people to assume some more responsibility. Two-thirds of our plan will be paid for by asking employers and employees who don't pay anything into the system now to do their part, while giving discounts to very small businesses with lower wage workers to avoid breaking them. We have to ask people who can afford to pay, to pay, because the rest of you are paying for them. And then when they get really sick, they get their health care, and you still pay for them. So we need some more responsibility.

Now, if you did all this and you look again at this American health care system, even if you just forget for a moment about the human element—and it's very hard to do with all these wonderful young people here—and you see us way up here at 14.5 percent a year of our income, everybody else at about 9. And we're losing 100,000 people a month, permanently, who are no longer covered with health insurance and 2 million people a month lose their health insurance, but the rest of them somehow get it back. But the system is hemorrhaging.

What can we do nothing about, and what do we want to do nothing about? We wouldn't want to do anything about the fact, I don't think, that we invest more in medical research and technological advances than other countries. We should be proud of that. It contributes to our economy. The fact that we have the strongest, in this State, pharmaceutical companies in the world, and they do a lot of research to find new drugs, we shouldn't begrudge that. Indeed, in our plan I'd like to make more use of pharmaceutical treatment where appropriate by giving people on Medicare and people with health insurance policies some coverage for drugs so that they can manage their health care better, I think many times at lower cost.

Then you look at the things we plainly want to do something about, the bureaucracy, the unnecessary procedures, the fact that the system is rigged for defensive medicine, a lot of problems with it. Then you ask yourself about, what's

the rest of the difference? The rest of the difference is, this country has more teen pregnancy, low-birthweight births, AIDS rates, and other kinds of serious, highly costly illnesses and much more violence. There is nothing I can do in a health care bill that will do away with that. We have simply got to be willing to change our behavior or admit that we are going to tolerate living in a country where homicide is the second leading cause of death among Americans between the ages of 15 and 25 and the leading cause of death among teenage boys today.

We just have to say, "Well, we've just decided we're going to continue to live in the only country where police routinely find themselves outgunned by out-of-control teenagers." We'll just have to say, "We have decided that we're not going to make our streets, our parks, or even our schools safe again." You heard the story of this fine family over here that Governor Florio cited.

I was in California this week on a town meeting. We were interconnected with four big cities in California. This fine, young Korean-American businessman stood up and talked about how his brother was shot dead by somebody that wasn't even mad at him in one of these arbitrary shootings. And then a young African-American boy, a junior high school student, stood up and told me how he and his brother did not want to be in a gang, did not want to have weapons, just wanted to be good students. And they were so concerned about the lack of safety in their school that they changed schools. So they went to the newer, safer school. And on the first day of school, they were lined up registering for school, and this young man's brother, standing right in front of him, was shot down because he got caught in the crossfire in a gunfight in the middle of the safer school.

Now, there are a lot of people who say things like, "Well, people do these things. Guns don't." I'll tell you what, I'll make them a bet. You give me the guns, and I'll see if the people can get it done.

This is a huge economic problem, all right. You've already heard this. Most of the people who are victims of the \$4 billion of gun violence every year in this country, 80 to 85 percent of them have no health insurance. So you pay for them. The system pays for them. It's part of the escalating cost of health care. It's part of why we can't close the gap between where we are and where other countries are. But the

human tragedy is the most important thing.

Why should this young man have to worry about how well he's going to walk for the rest of his life? And let me just say this: I come from a State where over half the people have a hunting or fishing license or both. There are towns in my State where you have to shut the schools and the factories down on the opening day of deer season, because nobody's going to show up anyway. I was in the woods with a .22 when I was a kid. I love the outdoors. This has got nothing to do with people having the right to train, to learn how to use, to care for a sporting weapon and to do it under controlled circumstances. It's got nothing to do with this. But I also live in a State now where kids get shot in their schools with weapons that were designed solely for the purpose of killing people.

And Dr. Hammond told me when we were making this tour something I didn't know. He said that just in the last few years, when people go to sites where people were shot with guns, they are three times more likely to see the gun-shot end in a fatality because of the use of semiautomatic and automatic weapons and multiple bullets in a body, just in the last few years.

And so, I tell you, my fellow Americans, we have a decision to make. And this is the time to make it. We can't keep saying that we deplore these things and it's terrible and keep extolling our American values on how much more law-abiding we are than other people and put up with this. We either need to say this is a level of chaos and human degradation and waste of human potential and incredible cost in society that we are willing to tolerate because we cannot bear to do something about it, or we need to get up, stand up, and be counted and do something about it.

We have to make a decision, and it's time to make it. And it directly bears on the ability of your Nation to develop a health care system that fixes what's wrong, keeps what's right, provides security, and doesn't break the bank. It is directly related.

We have a crime bill—Governor Florio mentioned it—before the Congress. It does a lot of things, but most importantly, here's what it does. It requires the Brady bill, which is a national 5-day waiting period, to establish background checks to check for age, criminal history, and mental health history. It matters. You must do it nationally. Why? Just near here in New York City, of the many thousands of weapons

confiscated last year by the police, 85 percent of them came from other States. If you don't have a national system, you will never fix this. It is a huge deal.

The second thing the crime bill does is to provide for the 50 percent of the downpayment of the commitment I made when I was running for President, that I wanted to ask the Congress to give the American people another 100,000 police officers in the next 4 years, not just to catch criminals but to deter crime. And lest you think it doesn't work, I can cite you many examples: places in New Jersey which have more police officers, where the crime rate has gone down; in New York City where the crime rate has gone down in all the seven major FBI categories where community policing has been deployed; in the city of Houston which had a 17 percent drop in crime in 1 year, because when people are there in force, it prevents crimes from occurring in the first place. So that's an important part of this.

Another part of the crime bill gives States funds to establish innovative programs for kids when they get in trouble before they do shoot somebody, to try to get them back into the mainstream of life. After all, a lot of these young people who get in terrible trouble are not really bad people. They have no structure, no order. They cannot imagine the future. There are no rules that bind them in internally to the things the rest of us take for granted. And we've got to try to get as many of them back as we can before they do something terrible which will require us to put them away for a long time.

We do have to deal with these things. And we need to pass a crime bill this year. These Members of Congress can do it. There are still people who are holding them back, and you need to urge them on. And I'll guarantee you, I'll sign it as quick as they'll put it on my desk. We have to do it.

But the second thing I want to say to you is that we need a national law to do what New Jersey has done here with the assault weapons. Again because we have a constitutional right to travel in this country. New Jersey can make a big dent in New Jersey's problems by abandoning these weapons here and then by setting up a system to try to collect them, but people are still crossing the State line all the time.

We need national legislation. There are several bills in the Congress and arguments about which one is better than which other one, but

I will guarantee you they are all better than nothing. And the Congress should pass one of those bills and send it to me this year. It would be a great Christmas present to the American people to stand up for safety.

Finally, let me just say that each of us in our own way are going to ask ourselves what we can do to deal with this. We have a culture of violence. We glorify it. I was delighted to see some of the television networks voluntarily say that they were going to do their best to try to monitor the content of violence and reduce it and degradation of people during prime time television.

We have got to take a whole generation of young people who have very short attention spans for whom the future has no claim because they cannot even imagine the future, and slowly, carefully, and one-on-one, neighborhood by neighborhood, community by community, help them to rebuild the kind of inner strength and sense of values and discipline and control and hope that will permit us to go where we need to go. No law will do that, but that is not an excuse not to pass these laws.

So I ask you today, here in this great place, let us recommit ourselves to keeping what's right about the health care system and to expand the reach of what is right when we can, with universal coverage, by giving pharmaceutical products to the elderly who are not poor enough to be on Medicaid but are on Medicare and the working people whose children may need it. Let us do that.

And let us have the courage to admit that some of these problems we will never fix until we change our ways as a Nation, and let's start with violence, begin with guns, and prove that we can do in America what you are doing here in New Jersey. Thank you and God bless you all.

NOTE: The President spoke at 3:41 p.m. in the Atrium. In his remarks, he referred to Mayor Jim Cahill of New Brunswick; Sheriff Armando Fontura of Essex County; Harvey A. Holzberg, president and chief executive officer, and Dr. Jeffrey Hammond, chief, trauma surgery and critical care, Robert Wood Johnson Hospital; and Patricia Jones, mother of a patient with a gunshot wound.

Nomination for an Assistant Secretary of Agriculture

October 8, 1993

The President today announced his intention to nominate Fred Slabach as Assistant Secretary for Congressional Relations at the Department of Agriculture.

"Fred Slabach knows how important the Agriculture Department is to rural Americans. I

know he will represent their concerns fairly in Washington, with this administration and with Congress," the President said.

NOTE: A biography of the nominee was made available by the Office of the Press Secretary.

Nomination for Administrator of the Rural Electrification Administration

October 8, 1993

The President today announced his intention to nominate Wally B. Beyer, the general manager of a North Dakota electric cooperative for the past 30 years, as Administrator for the Rural Electrification Administration at the Department of Agriculture.

"With his many years working to provide electricity to rural Americans in North Dakota,

Wally Beyer is exactly the type of person we need at the helm at the Rural Electrification Administration," the President said. "I am pleased he has joined our team."

NOTE: A biography of the nominee was made available by the Office of the Press Secretary.